

Express Mail No. ER 843 147 186 US ATTORNEY DOCKET NO.: 056409-5092

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
PAUL GAUDRON) Confirmation No.: 5559
Application No.: 10/632,790) Group Art Unit: 3677
Filed: August 4, 2003) Examiner: Katherine W. Mitchell
For: Fastener for Use with Frangible Material)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

AMENDMENT AND REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. § 1.111

The enclosed amendments and remarks are in response to the non-final Office Action dated November 1, 2004 for above-identified application. Please amend the application and consider the remarks as indicated on the pages which follow.

Because this response is being filed within three months of the mailing date of the office action, no fees are believed to be due. Should any fees be required, however, please charge any such fees to our deposit account 50-0310.

A copy of this page is enclosed.

02/18/2005 EKEY11 00000002 500310 10632790

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056409-5092-65 PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** SMALL ENTITY (Column 1) (Column 2) TYPE OR **TOTAL CLAIMS** RATE FEE RATE FEE OR BASIC FEE 750.00 BASIC FEE 375.00 NUMBER EXTRA FOR NUMBER FILED TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR minus 3 = INDEPENDENT CLAIMS 1:2 X42 =X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II** OTHER THAN SMALL ENTITY SMALL ENTITY OR (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **PREVIOUSLY** AMENDMENT AFTER **EXTRA** FEE FEE AMENDMENT PAID FOR Э°С Total Minus X\$18= X\$ 9= OR Minus Independent 1000 *** X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR TOTAL TOTAL OR ADDIT. FEE 100 ADDIT. FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI- $\mathbf{\omega}$ NUMBER REMAINING **PRESENT** RATE TIONAL RATE TIONAL AFTER **PREVIOUSLY EXTRA** NDMENT AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR AME Independent Minus X42= X84 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE ENDMENT **PREVIOUSLY** AFTER **EXTRA** AMENDMENT PAID FOR FEE FEE Minus Total X\$18= X\$ 9= OR Independent Minus *** X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Application or Docket Number